



### DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below my name:

I believe I am the original, first, and sole inventor (if only one name is listed below), or an original, first, and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention," **GYRICON DISPLAYS CONTAINING MODIFIED PARTICLES**" the specification of which [ ] is attached hereto and/or [X] was filed as Serial No. 09/694,855 on October 24, 2000 and was amended on \_\_\_\_\_ (if applicable); or was filed as PCT International Application Number \_\_\_\_\_ on \_\_\_\_\_ and was amended on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §§119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed:

COUNTRY (If PCT indicate PCT)	APPLICATION NO.	DATE OF FILING (day, month, year)	PRIORITY CLAIMED
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below:

PROVISIONAL APPLICATION NUMBER(S)	FILING DATE (day, month, year)

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s), or of 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

U.S. PATENT APPLICATIONS		STATUS (Check one)		
U.S. APPLICATION NO.	U.S. FILING DATE	PATENTED	PENDING	ABANDONED
PCT APPLICATIONS DESIGNATING THE U.S.				
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NO. ASSIGNED (if any)		

As a named inventor, I hereby appoint Martha Ann Finnegan (Registration No. 31,453), Michelle B. Lando (Registration No. 33,941), and Luke A. Kilyk (Registration No. 33,251) as my attorney with full power of substitution and revocation, to prosecute this

application and transact all business in the United States Patent and Trademark Office connected therewith.

**Please address all communications regarding this application to:**

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**Inventor's Signature:** 

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*Collin P. Galloway*

Full Name of Third Inventor: Collin P. Galloway

Date: \_\_\_\_\_

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